Re-moralizing the Suicide Debate

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Abstract

Contemporary approaches to the study of suicide tend to examine suicide as a medical or public health problem rather than a moral problem, avoiding the kinds of judgements that have historically characterised discussions of the phenomenon. But morality entails more than judgement about action or behaviour, and our understanding of suicide can be enhanced by attending to its cultural, social, and linguistic connotations. In this work, I offer a theoretical reconstruction of suicide as a form of moral experience that delineates five distinct, yet interrelated domains of understanding – the temporal, the relational, the existential, the ontological, and the linguistic. Attention to each of these domains, I argue, not only enriches our understanding of the moral realm, but provides a heuristic for examining the moral traditions and practices which constitute contemporary understandings of suicide.

Keywords: Suicide; philosophy; social values; humanities

There is a tendency to view the history of human inquiry into suicide as an archetypal, linear narrative, according to which our understandings of suicidal events – once the sole province of religious and philosophical thought – have been illuminated by rational analysis and the scientific method. According to this view, there is a clear division between pre-modern and modern approaches toward suicide (Rosen 1971). This resonates most keenly in the works of cultural-historians of suicide. Book and chapter titles such as "from morality to medicine" (Minois 2001), "from sin to insanity" (Watt 2004), and "from satan to serotonin" (Kushner 1989) convey the sense of a clear shift in the cultural discourse on suicide from the moral to the scientific; from the prescriptive to the descriptive.

The tendency to de-emphasise the moral dimension of suicide in medical and legal discourse (Mishara and Weisstub 2005) has received broad support from religious authorities. The entry for suicide in the *Encyclopaedia of Religion and Ethics* (Rose 1994, 24) states that, "perhaps the greatest contribution of modern times to the rational treatment of the matter is the consideration… that many suicides are non-moral and entirely the affair of the specialist in mental diseases." According to this view, literature, history, theology and philosophy, which hitherto had provided insight into suicide, were 'recognised' as having little of importance to contribute to contemporary understanding of suicide. Pre-modern

approaches to suicide lacked scientific authority and were largely made redundant by the emergent notion that suicide was nondeliberative and involuntary (Pabst Battin 1995).

The Irreducible Morality of Suicide

From the texts of ancient Greece and Rome through the theological writings of the Middle Ages up until the Enlightenment and beyond, philosophical reflection on the morality of suicide has been commonplace. Traditionally, this debate has involved theistic and secular arguments about the right to suicide, the sanctity of life and the moral duty toward the suicidal (Donnelly 1990). The foundations of these debates typically are framed by reference to moral concepts including rights, duties, goods, autonomy, justice and rationality. But while morality can be understood in terms of the traditional philosophical discourse regarding the permissibility of suicide, the moral realm can also be understood from a sociological or axiological perspective to include the values and capabilities that define 'good' human life, social relationships and the moral communities in which we forge our lives. As Kleinman (2006, 2) writes:

> Just carrying on our existence, negotiating important relations with others, doing work that means something to us, and living in some particular local place where others are also passionately engaged in these same existential activities – all of this is, by definition, moral experience.

In Kleinman's (2006) view, moral experience is closely associated with the values we ascribe to things; the things which matter to us. Living a moral life thus entails a moral commitment to conducting our lives in ways that feel right to us and to others around us. For Kleinman, therefore, the word 'moral' is not equivalent to 'good'. That is to say, our value orientations and moral commitments can be harmful to others, as well as ourselves. For example, we live within moral communities where communal values may be at odds with our own personal ones. Living a 'moral' life may therefore entail a series of challenges through which persons are impelled to respond to their moral environment and to the conflicts that confront them. This may result in personal discord or protest. Conversely, a person's moral commitments may be swayed by those of the moral communities in which they live, making them complicit in unethical practices. This may have significant moral consequences at a later date when persons come to, or are forced to, reflect upon their actions. This struggle to live a 'good life' and to hold on to that which we value in the face of uncertainty and vulnerability is a feature of the human condition.

This idea, that the moral life exists in everyday social contexts, as elaborated by Kleinman, as well as writers such as Margaret Urban Walker (1998), Charles Taylor (1989) and Martha Nussbaum (1990), substantially alters and enriches consideration of the ethics of suicide. Rather than simply being a matter of normative judgment, liberty, rights, or so forth, the issue of suicide becomes interwoven with an array of experiences to which persons ascribe moral significance such as illness, suffering, grief, and loss. That suicide is irreducibly moral is in many ways self-evident; for medical and social problems, with very few exceptions, are also moral problems. And importantly, this normative aspect of medicine and public health extends not just to judgement about actions such as suicide but to the epistemologies, health policies, discourses, and instruments that underpins them and enables their 'explanation'.

It is clear, therefore, that the moral dimension of suicide cannot be airbrushed out of public and professional debate surrounding suicide. This is significant, because if suicide can

be *understood* differently; that is, as an act with physiological, psychological, social, moral, and political dimensions, then it can be *responded* to differently: by therapy and medication, but also by social, moral, and political reform. In exploring this moral dimension it is possible to distinguish at least five distinct, yet interrelated domains of understanding: i) the temporal, ii) the relational, iii) the existential, iv) the ontological, and v) the linguistic, which together provide a richer account of the moral dimension of suicide.

The Temporal Domain

Human existence is a temporal existence. "Time is a basic dimension of human life. It is embedded in growth and decline, birth and death, change and continuity" (Rüsen 2007, 8). But, although we live our lives in the present, we are aware of them being situated spatially within a broader continuum, or flow of time. For example, that of historical time, biographical time, or cosmic or cyclical time. Time arises out of our relation to things; out of a relation to our own lives, to those of our ancestors, or to the cultures and lands we inhabit. Time, therefore, is something that we experience, not as a chain of self-contained, independent moments, but as a series of relations between past, present and future (Merleau-Ponty 1999).

Thus conceived, there are several ways in which the temporal domain is important for understanding the morality of suicide. First, suicide is historical. Its meaning, methods, rates, and concepts are not static but change over time (Boldt 1988; Mäkinen et al. 2002; Pabst Battin 2005; van Hooff 1990). Every suicide, therefore, is a historical event. Each and every suicide is located within its own temporal nexus of cultural, social, personal, moral, and/or political factors. In this view, knowledge of the prevailing cultural-historical background becomes a necessary condition for understanding the individual act of suicide (Boldt 1988; Mäkinen et al. 2002). Indigenous suicide for example, was largely non-existent prior to the 1950's, but suicide rates in Indigenous communities are now some of the highest in the world (Hunter et al. 1999; Elliott-Farrelly 2004). Historians of suicide have shown how suicide is indelibly linked to local socio-cultural norms, and how it serves to communicate a particular set of meanings within the local socio-cultural setting (Hill 2004; Mäkinen et al. 2002; van Hooff 1990, 2000). For example, *Seppuku* the traditional form of ritualistic suicide in feudal Japan, is imbued with important cultural values of honour and self-esteem and provides a clue to understanding Japanese moral values on life and death (Fusé 1980).

Time also exists in relation to individuals. Time is understood biographically just as lives are marked by time and history. We are born, we grow through childhood into adulthood, and finally, we die. Thus, our lives exert a temporal structure that is also deeply historical. That is, our present experience is always situated within a broader life-history. Or, as MacIntyre (1981, 217) writes, "I am the *subject* of a history that is my own and no one else's." If being a human subject means being situated spatially in time, then it also means occupying a place within it. This means existing in a moral space, "a space of issues, to do with how one ought to be, or how one measures up against what is good, what is right, what is really worth doing" (Taylor 1988, 298). Given the vicissitudes, frailty, and mortality of human life, this evaluative space becomes a staging point for potential questions about the meaning or significance of life that may arise across a lifespan. These will differ markedly according to the values, aspirations, and other situational features of the life in question, meaning that suicide may present itself at a particular point in a person's life history rather than at another.

Having situated suicide within the context of a persons' life history, and having located within that life history any number of points where persons may be more or less vulnerable to suicidal thoughts and actions, it is important to note that although persons live their lives in the present, they recognise their lives as continuous and, therefore, as existing spatially across time. "To live in the present", writes Chesterton (1935, 198), "is like proposing to sit on a pin. It is too minute, it is too slight a support." Our present existence, therefore, is inscribed by the past and shaped by the future. We reflect upon our pasts. We plan our futures. We have beliefs, regrets, desires and aspirations. Without this sense of personal continuity, human lives are without moorings; their identities breached (Chandler and Proulx 2006).

But people understand their lives not simply by reference to their own biographical narrative, to their own past and own future(s), but also as part of a shared history or tradition. For example, different indigenous, religious, and secular traditions situate persons within a broader cosmology or worldview where ideas circulate about our past as well as our future. These orientations play a decisive role in shaping human understandings of the natural world, of kin relations, as well as views about the value and meaning of life and death. And these, in turn, influence social action.

For example, Chua (2011) claims that just as our cultural and historical conditions work to produce a particular kind of ethical subject, they also produce a particular kind of temporal subject. In an ethnographic study of suicide in Kerala, India, Chua claims that the social and material conditions of late capitalism situate persons differently in respect to the ways they experience time. In comparison to the "temporal cosmologies" of more 'traditional' societal and familial structures, the acceleration of modern life, according to Chua, has led to a rupturing of the temporal order, contracting temporalities, altering relational dynamics and "producing pleasure-seeking, suicide-prone citizens" (113). Chandler and Proulx's (2006) work on suicide and personal and cultural continuity in First Nation Canadian youth also illustrates the connection between suicide and temporality. In their account, First Nation communities preserve a sense of continuity by maintaining a connection to their collective past and future. But if this sense of continuity is fractured (by colonialism, for example) and people become disconnected from their past and future, then cultural identity and persistence are undermined and the threat of self-harm increases.

The Relational Domain

Just as we are situated in time and history, so too are we situated in a history of relationships (Whitbeck 1983). While this may seem self-evident, the Western notion that an individual is 'best' understood as atomistic and autonomous has come to dominate much of the thinking about the ethics of health care and suicide and provides the foundations of many of our political and legal institutions. In recent years, however, this notion has come under increasing criticism for providing an imperfect model of human cultural life, psychological processes, relationships, and moral action (Gergen 2009).

Partly in response to models of human identity that emphasised cognition, autonomy, liberty, and reason, in the manner of Descartes *cogito*, social (Mead 1913), relational (Gergen 2009; Rumsey 1999; Surrey 1991), and dialogical models (Bakhtin 1984; Hermans and Kempen 1993; Hermans 2001) of the self have been advanced as an alternative conceptualisation of human relational dynamics and being. Though distinct, each of these views stresses the collaborative, interdependent, and interconnected nature of human lives. In each, individual lives are seen to extend across traditional boundaries of mind and body,

self and other, person and culture, individual and society. And in each, dualisms which have been the hallmark of Western philosophy since the 17th century are reversed; with individual lives being seen as the product of relational processes (Gergen 2009).

In their attempt to eliminate the distinction between 'inner' and 'outer', relational understandings raise pertinent questions for those intellectual traditions which continue to theorize suicide in terms of separate 'units'. Biological, psychological, cultural, and social factors are often cited as 'causing', 'influencing', or 'effecting' suicide. The strong tradition of causal understanding in the social and medical sciences, together with public health measures aimed at preventing suicide, it is argued, helps to maintain this distinction.

> When we search for causal explanations for a person's actions, we begin to split the world into independent entities. There are causal conditions on the one hand and their effects on the other. Thus, we treat acts of aggression, altruism, and prejudice as effects, and search for an independent set of conditions that bring these about. In effect, we define the individual as fundamentally separated from the surrounding world, alone, and subject to its vicissitudes (Gergen 2009, 51).

A relational view of human lives understands processes of thought, language, emotion, action, identity, and (self) knowledge not as internal processes, but as products of human relationships (Bruner 1986; Gergen 2009; Sarbin 1986; Vygotsky 1978). The nexus between suicide, culture, and interpersonal and intrapersonal dynamics has long been recognised. The association of suicide with cultural meanings of shame, revenge, protest, and honour within ancient Greek and Roman societies suggests a strong relational basis for such acts. (Hill 2004; van Hooff 1990, 2000). And being relational, suicide can be understood as a socially meaningful act containing a strong communicative component (Douglas 1967). Research into the communicative aspects of suicide has led to the elaboration of a number of interpretations of the social meaning of suicide, including suicide as a 'cry for help' (Farberow and Shneidman 1961), and/or as an expression of 'rage' (McCandless 1968).

And yet the influence of culture on suicide, like that of biology, does not exist independently of context. In the relational view, suicide involves a confluence of factors – biological, cultural, social, temporal, and cognitive, which, in combination, help to constitute the suicidal event. In this sense, suicidal events share many of the characteristics of practices discussed by Brent Slife (2004), in that the event "do[es] not exist, in an important ontological sense, except in relation to the concrete particular situations and cultures that give rise to [it] (158)." This is what is meant by the claim that every suicide or attempted suicide is a historical event. Suicidal events do not exist independently but are "ontologically related to their contexts and can qualitatively change as their contexts change" (159).

It is often argued that knowledge of the 'self' is also produced relationally (Hermans 2001; Gergen 2009). According to this view, the 'relational' self considers human subjectivity and identity to be constituted through a series of relationships – with other persons, with language, with the culture/s in which we live, and also with the self. Whereas this discussion has tended to focus on the interpersonal dimension of suicide and suicide research, a claim is hereby made for understanding persons or 'individuals' as the site of ongoing relational dynamics in which suicide may be implicated. Our spatial positioning in time, in relationships, in culture, and in a horizon of values and meaning, means that as persons we may inhabit different positions within and throughout a lifetime. While our orientations toward the 'good', or 'right', or 'worthwhile', can change with time, a relational view of the self also sees persons as being populated by multiple, shifting positions or 'voices' (Raggatt

2006). This intrapersonal domain is familiar to anyone who has found themself engaged in an internal dialogue when confronting the myriad possibilities which often present to the question: "What should I do?" In reflecting the complexity of psychological lives, a relational understanding of the self provides the opportunity for grasping the moral struggle which persons encounter when grappling with the question of suicide.

The Existential Domain

Intrapersonal conflict, therefore, is considered a fundamental part of human lives. For an example of the way this manifests itself within the realm of suicide we need look no further than Shakespeare. Hamlet's soliloquy, "To be or not to be?" presents in dramatic form the internal conflict long associated with suicide: What value is a life of suffering and despair? And does death offer a release from these woes? Hamlet's words capture something distinctive about the human condition. His musings on life and death are not only the words of a tormented young prince but those of humankind in general. Hamlet's reflection upon existence and destruction underpin our quest to live truly meaningful and worthwhile lives (Minois 2001). For Hamlet, therefore, like Camus (1955), Hume (2005), the younger Seneca (1974), Améry (1999), and others, the question of suicide is an ineluctable and indispensable part of our human existence.

But while suicide is often regarded as a manifestation of the existential crisis of human existence, it is often unclear what this means. Contemporary works on suicide frequently employ the term 'existential' as part of their conceptual armoury, yet rarely articulate exactly what they mean by this term. While such works often draw upon themes commonly associated with existentialist thought – death, despair, meaninglessness, isolation, freedom, and so on – there is often a profound disconnect between these accounts of existential angst, philosophical descriptions of existentialism as a style of thought or sensibility, and other, well recognised existentialist works on suicide, such as Camus' *The Myth of Sisyphus* (1955), and Améry's *On Suicide* (1999). It is important, therefore, to be clear as to what I mean by the term existential in the context of suicide.

According to Kaufmann (1975), what connects the otherwise disparate list of authors labelled 'existentialist' – Kierkegaard, Nietzsche, Ortega, Heidegger, Jaspers, Sartre, and Camus amongst them – is not a discernible set of philosophical precepts, but rather, a shared disregard for traditional philosophy, and in particular, its rules, concepts, and systems. In the existentialist view, human existence as a mode of being is dynamic, emergent, contingent, and elusive. As a result, the concerns of the existentialist philosopher are markedly different from those philosophers whose work is guided by principles of rationalist thought. Human existence is not something which can be contained within an enclosed "system" (Macquarrie 1986). To do so is a distortion; rendering an incomplete and imperfect image of human life (Nietzsche 1975). Giving expression to the concrete particularities of human existence, and, in particular, human emotional life, is thus a central feature of existentialist thought (Macquarrie 1986).

Unsurprisingly, perhaps, existentialist constructions of human identity and suicide have been criticised on the ground that they are elitist, or romantic, and removed from the brutal reality of suicide. But while exuberant, expressive, and, at times, pessimistic, it is not correct to say that existentialist thought takes a romantic view of suicide. On the contrary, it is human existence shed of artifice, and not romanticism, which is at the heart of existentialist writing about suicide. Indeed, existentialist thought takes an uncompromising view of despair, anxiety, suffering, and death – and how to live in the face of it – challenging

philosophical orthodoxies which have, in various manifestations and within various academic disciplines, considered these preoccupations irrelevant, or indeed, an obstruction to objective knowledge (Kaufmann 1975; Macquarrie 1986).

One result of this preoccupation with the concrete particularities of human existence, and the difficulties of enunciating it formally and conceptually, is that strong arguments are often made in favour of the representation of existentialist thought not through philosophy, but through art and literature (Kaufmann 1975). Works by Dostoevsky, Camus, Sartre, Kafka, and Rilke famously express the problems of human existence and, in particular, "whether life is worth living and when" – questions that science is incapable of answering (Weber 1970, 144). Thus, rather than romanticising suffering, or averting one's eyes from the everyday struggles of human existence and the realities of suicide, existentialist thought seeks to capture all of its rich texture and revels in the search for truth. Not the abstract, objective kind of truth, but the truth of existence, stripped of all pretence (Macquarrie 1986). Thus, to paraphrase Galdston (1961, 847) who writes, "[on] taking a closer view of existentialism one finds that what originally seemed strange and alien begins to sound somewhat familiar." The existentialist domain holds a mirror up to human lives, forcing us to confront questions which are eternal, perplexing, and distinctive to humanity. Weaver (2009, 3) provides perhaps the fullest statement of the value of such intimate explorations and so is worth quoting at length:

> Why am I here? Why have certain things happened to me? What will happen to me in the future? Will my fortunes rise or fall? Is my life meaningful? These and other closely related questions frame the human condition. How people actually broach such issues remains elusive and exceedingly difficult to document. Nevertheless, their centrality to life demands that we grapple with them if we are at all interested in how people have lived their lives, imagined their material or emotional state, and charted their future. We should be interested, not for mere curiosity, but in order to reaffirm the preciousness of life, discern all that threatens its enjoyment, and strive for personal conduct and social action that may ameliorate troubles for others and ourselves.

Closer examination of existentialist thought, as well as works on suicide that emphasise the importance of interpersonal and intersubjective relations, provide something of a practical reminder that philosophical concern should not stop with the portrayal of the tragic intensity of human existence, but should be aimed toward its successful realisation (Macquarrie 1986). In this view, philosophy is not considered a theoretical enterprise but a practical one; providing persons with models for living worthwhile and meaningful lives, alone and with others.

The Ontological Domain (The Domain of Meaning)

If human lives are meaningful and actions and experiences are informed by this meaningfulness, then the domain of meaning takes on special significance in the study of suicide. But if this seems intuitively self-evident – it is important that we are clear as to what it is that we are talking about when we talk of the 'meaning' of suicide.

First, like existence, we should not consider meaning to be a thing or substance, but rather, an activity (Polkinghorne 1988). Indeed, the idea that language reflects reality is philosophically highly problematic (Nietzsche 1979; Wittgenstein 1968). For our understanding of the world is mediated primarily through systems of representation, and, in

particular, language. This is not to suggest that things do not exist, or that we simply bring them into being by communicating them, rather, that language does more than represent something – it also helps to frame and interpret it. It is a way of bringing persons into relation with their world (Webb 2009). According to Webb (2009, 30), "processes of representation do not simply make meaning present... they *construct* that meaning" through the assimilation of ideas or evidence which then stand in for that external reality.

The notion that meaning is constructed through social processes rather than existing independently of us asks a number of questions of suicide, for suicide is understood very differently within and across different cultures, traditions, and eras – suggesting that the meaning of suicide is not static, but that it is constantly being made and remade. And conflicting views on the meaning of suicide can, and do, co-exist. Suicide has been variously described as rational, irrational, cowardly, honourable, brave, and weak. The work of Paperno (1997) leads us to consider the constructionist argument further. Her claim is that writers such as Plato (1975, 1975), Aquinas (1990), Durkheim (1951), and others, appropriated the act of suicide as a means of investigating and resolving fundamental philosophical and social questions about nature, God, the individual, and society, thus creating a powerful cultural metaphor through which important social values, concerns and ideals could be articulated. This has resulted in suicide becoming a repository for a host of symbolic meanings.

The constructionist critique also gives us pause to reflect on the idea of suicide as a 'social fact'. By social fact, I speak of those phenomena which are marked by their social, rather than their physical properties. This includes ways of acting, thinking and feeling which hold separately from the individual, and which are informed by different moral traditions and social practices (Durkheim 1951). Being external to the individual, social facts inform thoughts, feelings, and actions. Thus, social facts carry meanings and mediate the ways individuals perceive their world – processes of socialisation and enculturation being the most obvious examples of this. Boldt (1988), for example, considers suicide to be a cultural artefact whose meanings are not intrinsic to the act of suicide but which result from the social and cultural traditions, symbols, and institutions which enfold it and give it meaning. Thus, the meanings of suicide do not arise in isolation but are related to values and attitudes surrounding, amongst other things, "the meaning of death, the value of life, the relationship between the individual and the community, the nature of suffering, the significance of punishment, the existence of an afterlife, [and] the nature of the self" (Pabst Battin 2005, 172-173).

But while cultural norms and meanings influence ways of relating to suicide, meaning is not something which holds independently of persons. Meaning is always 'situated' and socially constructed (Taylor 1985). And while cultural meanings precede the individual (Boldt 1988), the heterogeneity of cultural meaning means that different meanings may be expressed within different suicidal events. To understand suicide, therefore, we must engage with both the individual meanings expressed within each suicidal event (Douglas 1967), and the social and cultural meanings which give it form (Boldt 1988). In doing so, we may, as others have described (Obrador 2012) distinguish between 'thick' and 'thin' concepts of sociality. For example, we may employ thin understandings of suicide that describe suicide in abstract terms as a 'cry for help' or a 'cry of pain', and thick understandings of suicide that integrate the social relationships, processes, interactions, and discourses that bear on how we understand it.

Discussion of meaning must also consider the role of interpretation. For if meaning always has a subject, then the meaning of a sentence, a sound, or a suicide is always the meaning of that *something* to *someone*. It follows, then, that there may exist different ways of understanding the same phenomenon depending upon our interpretive frame and the linguistic resources we have for expressing them.

The Linguistic Domain (The Domain of Language)

This complexity of meaning as it relates to suicide leads us to consider the linguistic resources available for expressing this variety. In his study of Graeco-Roman suicide, van Hooff (1990) assembled some three hundred Greek and Latin words used to describe suicidal acts. This abundance of expression led him to conclude that the opacity of the act, together with the stylistic and rhetorical requirements of *variatio*[1], compelled classical authors to elaborate the subtle differences between individual acts. For example, some spoke of "'leaving life' (*leipo, ekleipo, kataleipo ton bion/to zen*)", "'thrusting away life' (*apotheo zoen*)", or "'grasping death' (*lambano thanaton*)", while others talked of "'a sensible removal' (*eulogos exagoge*)", or "'to carry oneself off' (*anairein heauton*)" (van Hooff 1990, 140-141). As these examples indicate, suicide was viewed as both a way of dying, as well as a form of killing (Daube 1972), with the terms used to describe suicidal events providing important rhetorical, moral, and heuristic functions.

Daube's *The linguistics of suicide* (1972) claims that this holds true for descriptions of suicide in many other epochs and in many other cultures. So, while the classical vocabulary is largely devoid of any hint of condemnation of suicidal acts, the Middle Ages are marked by more hostile language with Augustine using the expression the "'wringer-out of one's own soul' (*extortor animae suae*)" to describe the suicidal act (van Hooff 1990, 141). Similarly, the shift toward the more neutral term – *suicide* – during the 18th century provided a means for escaping the condemnatory references to murder in many Western countries and the moral and legal sanctions placed upon the act of self-killing.

According to Daube (1972), linguistic concepts of suicide are, therefore, marked by two clear trends. The first of these concerns the shift in 'tone' between classical, medieval, and later, more humanistic approaches to suicide which clearly reflect prevailing values and attitudes toward suicide. The second theme to emerge from Daube's analysis is the shift from more tangible, concrete understandings of suicidal events to one of increasing abstractedness. Daube's analysis focuses most closely on the nominalization of particular verb forms and the reification of actions or events into things or concepts. He outlines this process as follows:

> People are said "to think," "feel," "speak," "dominate," "buy," "sell" long before these doings are turned into "thought," "feeling," "speech," "domination," "a buy," "a sale." The emergence of the noun betokens a decisive advance in abstraction, systematization, institutionalization. "To state," "to deny," "to accuse," "to justify" – these are verbs predicating something about the subject of the sentence. Once the nouns "statement," "denial," "accusation," "justification" are formed, the activity itself has become the subject, to be focused upon; it is established, "substantivized" (Daube 1972, 397).

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[1] Because classical works of poetry and drama typically drew from tradition, an author's skill and inventiveness was in large part measured by their ability to vary that which had already been told through stylistic expression, or by emphasising and elaborating certain details (Javitch 2005).

A similar process occurs when we move from the suicidal acts of individuals; turning their personal acts of groping, thrusting, grasping, escaping – or whatever it might be that their act seeks to communicate or assert, into *suicide* – an act of ontological and epistemological significance in its own right. The uptake of the term *suicide*, therefore, marks a particular turning point in the formation of the modern conception (and meaning) of suicide. The act of cutting one's wrists or taking an overdose now becomes an act of 'suicide' or 'attempted suicide'; an act that, in its eschewal of the particular and the tangible, enables it to be subsumed within a category that includes many more or less similar acts. This involves a shift in understanding suicide as an event located in a particular time and place and in relation to prevailing social and cultural meanings and values, to one which stands apart from culture and history. This fixing and codifying of the concept of suicide has had a profound impact on modern approaches toward suicide – transforming suicide from a metalinguistic category for denoting individual acts of self-killing into an ontological entity in its own right. This meant that it was now possible to ascribe it with an immutable essence and to consider it amenable to general and discoverable laws.

These intricately woven conceptual and linguistic meanings are matters which any study of suicide and suicide research needs to consider from the outset, as they both define and delimit the scope of research into this most complex of phenomena. The ongoing debate surrounding the terminology and taxonomy used to describe and define suicide demonstrates how important language is, and remains, not simply because it reveals the symbolic representation of suicide (its ontology), but because it reveals how we should think about it (its epistemology), and how we should research it (its heuristic).

Conclusion

The dominance of biomedical constructions of suicide has led, over the past century, to the marginalisation of morality such that reflection on the moral dimension of suicide is felt to add little to its understanding. In many ways, however, this misunderstands both morality and the persistence of morality in the public discourse surrounding suicide and the way that we understand it both as individuals and collectives. By focusing on five, distinct, yet interrelated domains – the temporal, the relational, the existential, the ontological, and the linguistic – I argue that suicide is irreducibly moral, and that philosophical inquiry has much to contribute to our understanding of suicide beyond questions of its moral permissibility.

The temporal domain illustrates how human lives inhabit a moral space that is historically situated, and how local socio-cultural norms of human action, experience, and identity intersect with suicide. The relational domain presents a view of suicide as situated in a complex of interpersonal and intrapersonal relations, as being socially produced and the bearer of particular social values and meanings. The ontological domain illustrates how these meanings are informed by moral traditions and how they may be negotiated, resisted, or challenged depending upon our interpretive frame. The existential domain illustrates how suicide is related to questions of human existence, how many of these elements resist formal explanation, and how our ways of responding to these issues challenge us epistemologically and ethically. And the linguistic domain reminds us of the importance of language in shaping the ways that suicide is understood.

The framework presented offers access to moral understandings of suicide which may be missed, glossed over, or ignored by the systematic, functional approaches which characterise contemporary suicide research. This framework does not, of course, seek to replace these methods of discovery, nor diminish the importance of the 'functional',

scientific, or biopsychosocial understandings of suicide and mental illness. It remains true that many suicides should be viewed primarily as a medical or public health concern. But it is also true that caring for people who may have limited capacity or who may seek their own extinction raises profound moral and practical questions regarding the authenticity and ontological value of persons. I suggest that by acknowledging the temporal, relational, existential, ontological, and linguistic dimensions of suicide, the care of people who have attempted suicide may be optimised and our understandings of suicide placed in their proper social and moral space.

Acknowledgements

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